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COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

					PD-970567 Original Continuation Division Continuation- in-part Supplemental		
	As a below named inventor, I hereby declare that:						
	My residence, post office address and citizenship are as stated below next to my name.						
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled						
		System and Metho	od for Multicasting Multimedia Conte	nt	•		
1 =	the specification of which						
	(check one)	is attached hereto.					
The Hard with Just Come for their Just Just Hard He He	X	was filed on October 27, 1997 as Application Serial No. 60/063,692 and (a) [other than supplemental] was amended on or (b) [supplemental] with amendments through .					
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.						
	I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.						
	I hereby claim foreign priority benefits under Title 35, United States Code, §119(a) through §119(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:						
	Prior Foreign Application(s	s)					
	Number	Country	Double Of one Filed	Prior Ye	ity Claimed s X No		
		Country	Day/Month/Year Filed		• •		
	I hereby claim priority benefits under Title 35, United States Code, §119(e) of any U.S. Provisional application(s) for patent or inventor's certificate listed below and have also identified below any application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:						
	Prior Provisional Application	on(s)					
	60/063,692	U.S	27/10/97	Prior X Y	ity Claimed es No		
	Number	Country	Day/Month/Year Filed	-	• • •		



I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date		Status (patented, pending, abandoned)			
I hereby appoint the following attorneys, obusiness in the Patent and Trademark Office	or agent and attorneys, to be connected therewith:	prosecute this applica	ווטון מווט נט וומווסמטנ מו			
John T. Whelan, Michael W. Sales,	Registration No. 32,448 Registration No. 30,213.					
Address all telephone calls to John T. Whelan at (301) 428-7172.						
Address all correspondence to Patent Records Administration, Hughes Electronics Corporation, Bldg. 001/A109 P.O. Box 956, El Segundo, California 90245-0956						
I hereby declare that all statements made information and belief are believed to be to willful false statements and the like so made any patent issued thereon.	ue; and further that these s	rimprisonment or both	under Section 1001			
FULL NAME OF SOLE OR JOINT INVENTOR	INVENTOR'S SIGNATURE	<i>y</i>	DATE 3/27/98			
Douglas M. Dillon RESIDENCE (CITY AND STATE) Gaithersburg, Maryland	Douglas MI	CITIZEN U.S.				
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FULL NAME OF SOLE OR JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE			
RESIDENCE (CITY AND STATE)		CITIZE	NSHIP			
POST OFFICE ADDRESS						
FULL NAME OF SOLE OR JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE			
N/A RESIDENCE (CITY AND STATE)		CITIZE	NSHIP			
POST OFFICE ADDRESS						
FULL NAME OF SOLE OR JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE			
N/A	<u></u>	CITIZE	ENSHIP			
RESIDENCE (CITY AND STATE)	•					